C.L
17/5

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	lw	7534	10-24-00
O.I.P.E. CLASSIFIER		49	10/29/00
FORMALITY REVIEW	H-S	JC866	12.04.00
RESPONSE FORMALITY REVIEW			

Q.C
12-6-0
BC

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
–	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim Final	Original	2/3/04	Date		Claim Final	Original	Date		Claim Final	Original	Date
(1)	✔				51				101		
2	O				52				102		
3	O				53				103		
4	O				54				104		
5	✔				55				105		
6	✔				56				106		
7	✔				57				107		
8	✔				58				108		
9	✔				59				109		
10	✔				60				110		
11	✔				61				111		
(12)	✔				62				112		
13	✔				63				113		
14	✔				64				114		
15	✔				65				115		
16	✔				66				116		
17	O				67				117		
18	O				68				118		
19	O				69				119		
20	O				70				120		
21	O				71				121		
22	O				72				122		
23	✔				73				123		
24	✔				74				124		
(25)	✔				75				125		
26	✔				76				126		
27	✔				77				127		
28	O				78				128		
29	O				79				129		
30					80				130		
31					81				131		
32					82				132		
33					83				133		
34					84				134		
35					85				135		
36					86				136		
37					87				137		
38					88				138		
39					89				139		
40					90				140		
41					91				141		
42					92				142		
43					93				143		
44					94				144		
45					95				145		
46					96				146		
47					97				147		
48					98				148		
49					99				149		
50					100				150		

If more than 150 claims or 10 actions
staple additional sheet her

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